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APPLICANTS

Wei-Lien Hsu, Austin, TX;

David Horton, Austin, TX;

** CONTINUING DATA ***** *CD* none** FOREIGN APPLICATIONS ***** *CD* none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS <i>17/16</i>	INDEPENDENT CLAIMS <i>4/6</i>
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>CD</i>				

ADDRESS

B. Noel Kivlin
 Conley, Rose & Tayon, P.C.
 P.O. Box 398
 Austin, TX
 78767-0398

TITLE

Two-dimensional discrete cosine transform using SIMD instructions

FILING FEE RECEIVED 1048	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees (Filing) <input checked="" type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input checked="" type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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